

 <b>MARYSVILLE POLICE DEPARTMENT</b> 1635 Grove St Marysville, WA 98270 (360) 363-8300	<b>Initial Case Report</b>
	<b>Case Report # 2018-00023363</b>

### NARRATIVE

#### Marysville Police Department Officer Cornett Report

**Date:** 05-06-2018**Case:** 2018-00023514**Time:** 1042 hours**Location:** 4349 149 PL NE, Marysville, WA**Assignment:**

I (Officer Cornett) was assigned to the Marysville Police Department Patrol Division (8D2) on the above date and time inside the City limits of Marysville Snohomish County, Washington. I was wearing the standard Marysville Police Department patrol uniform consisting of blue patrol uniform with shoulder patches having the name "Marysville Police", badge, name and gun belt. I was driving a fully marked police car equipped with lights, siren, and decaling saying Marysville Police Department.

**Actions:**

I responded to the above location regarding an assault report. I contacted [REDACTED], a RN at Smokey Point Behavioral hospital. [REDACTED] advised me that this incident occurred on 05-05-2018 at approximately 1730 hours. [REDACTED] stated a patient, [REDACTED], involved herself in another patient's situation. [REDACTED] stated [REDACTED] would not follow directions and step away from the other patient. [REDACTED] stated [REDACTED] became physical with her by spitting and kicking her. [REDACTED] stated [REDACTED] eventually calmed down after they restrained her. When [REDACTED] was released she began yelling and instigating her peers. [REDACTED] stated as they were escorting [REDACTED] to her room [REDACTED] turned and punched [REDACTED] in the face and head three times.

[REDACTED] stated [REDACTED] was medicated in her room and calmed down and fell asleep.

I am forwarding charges to the Denney Youth Center for Assault 3<sup>rd</sup> Degree of a medical professional.

This document was submitted on a device that is owned, issued or maintained by the Marysville Police Department, which is an identified criminal justice agency in Washington State.

I certify under penalty of perjury under the laws of the State of Washington the foregoing is true and correct (RCW 9A.72.085) and I am entering my authorized user ID and password to authenticate it.

Signed: Greg Cornett Date: 05-07-2018 Marysville, Snohomish County Washington.

End of report

This report was submitted from an electronic device owned, issued, or maintained by a law enforcement agency using my user ID and password. I certify or declare under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.

<b>REPORTING OFFICER / ID #</b> Cornett, Gregory 0118	<b>APPROVING SUPERVISOR</b> Elton, Jon
<b>LOCATION SIGNED</b> Snohomish County, WA	<b>DATE SIGNED</b> 05/07/2018

This officer's narrative is complete when an approving supervisor's name is attached. Complete report details do not print in this format.